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Bib Data Sheet

CONFIRMATION NO. 3588

SERIAL NUMBER 10/071,786	FILING DATE 02/07/2002 RULE	CLASS 411	GROUP ART UNIT 3627 79	ATTORNEY DOCKET NO. A01280US
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APPLICANTS

Carroll Diaz, Cut Off, LA;

** CONTINUING DATA ***** *None Inv*** FOREIGN APPLICATIONS ***** *None Inv***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**** SMALL ENTITY **
** 03/11/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>mvo</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
LA	4	10	2

ADDRESS

22920

TITLE

Toggle bolt device

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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BIBDATASHEET

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CONFIRMATION NO. 3588

SERIAL NUMBER 10/071,786	FILING DATE 02/07/2002 RULE	CLASS 411	GROUP ART UNIT 3677	ATTORNEY DOCKET NO. A01280US
APPLICANTS Carroll Diaz, Cut Off, LA;				
** CONTINUING DATA *** <i>None</i>				
** FOREIGN APPLICATIONS *** <i>None</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 03/11/2002				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY LA	SHEETS DRAWING 4	TOTAL CLAIMS 10 INDEPENDENT CLAIMS 2
ADDRESS 22920 GARVEY SMITH NEHRBASS & DOODY, LLC THREE LAKeway CENTER 3838 NORTH CAUSEWAY BLVD., SUITE 3290 METAIRIE , LA 70002				
TITLE Toggle bolt device				
FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit		